## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
MOVEON.ORG POLÍTICAL ACTION	
	C C00341396
Check if 24-hour report 48-hour report New report Amends report fi	led on
Full Name of Payee	Date of Public Distribution/Dissemination
Envato Markets	10 22 2016
Mailing Address 215 South State Street	10 22 2010
Suite 1200	Amount
City State Zip Code	59.00
Salt Lake City UT 84111	Transaction ID : SE.11369  Date of Disbursement or Obligation
Purpose of Expenditure Ad Production  Category/ Type	10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Of	fice Sought: House District: 00
CLINTON, HILLARY RODHAM, , ,	x President Senate State: <u>DC</u>
Odioridal Todi To Bato	sbursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
Facebook	10 22 2016
Mailing Address 1601 Willow Rd	
	Amount
City State Zip Code	90.00
Menlo Park CA 94025	Transaction ID : SE.11368 Date of Disbursement or Obligation
Purpose of Expenditure Category/	M M / D D / Y Y Y Y
Online Advertising Type	10 21 2016
Name of Federal Candidate Support O	ffice Sought: House District: 00
CLINTON, HILLARY RODHAM, , ,	▼ President Senate State: DC
	isbursement For: Primary <b>X</b> General
1 of Election to Cinico cought	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	149.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eigenty committee) any political party committee or its agent.	
Matzzie, Tom, , ,  [Electronically Filed] Date	M = M / D = D / Y = Y = Y = Y
Signature Date	10 22 2016

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	EXI ENDITO	TILO		PAGE 2 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FE	EC IDENTIFICATION NUMBER ▼
MOVEON.ORG POLITICAL ACTION				C00341396
Check if 24-hour report 48-hour report	X New report	Amends repo	rt filed on	M / D = D / Y = Y = Y
Full Name of Payee Facebook			Date of I	Public Distribution/Dissemination
Mailing Address 1601 Willow Rd			10	
City  Menlo Park	State Zip CA 940	Code 025		3000.00  tion ID : SE.11373  Disbursement or Obligation
Purpose of Expenditure Online Advertising	Ca	ategory/ Type	M 10	M / D D / Y Y Y Y
Name of Federal Candidate	ı	Support	Office Sought:	House District:00
TRUMP, DONALD J., , ,		X Oppose	<b>✗</b> President	Senate State: DC
Calendar Year-To-Date Per Election for Office Sought	27	7237.17	Disbursement F 2016 Othe	for: Primary <b>X</b> General er (specify) ▶
Full Name of Payee			Date of	Public Distribution/Dissemination
Facebook			M 10	
Mailing Address 1601 Willow Rd			Amount	
City	State Zip	Code		1500.00
Menlo Park	CA 940	025	Transacti Date of	on ID : SE.11374 Disbursement or Obligation
Purpose of Expenditure Online Advertising	Ca	ategory/ Type	10	21 / 2016
Name of Federal Candidate		<b>✗</b> Support	Office Sought:	House District:00
CLINTON, HILLARY RODHAM, , ,		Oppose	<b>x</b> President	Senate State:DC
Calendar Year-To-Date Per Election for Office Sought	27	8737.17	Disbursement F 2016 Othe	For: Primary <b>X</b> General er (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			<b>•</b>	4500.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		<b>•</b>	7
(c) TOTAL Independent Expenditures			·	7 1 1 7 1 1 7 1
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	e or authorized con			
Matzzie, Tom, , ,	[Electronically	<i>Filed]</i> Date	M M / D	22 2016
Signature				

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	iei oiti oi indei	ENDENT EXITERD	TOTILO		PAGE 3 FOR SE OF F	OF 4 OBM 24/48
NAME OF COMM					FEC IDENTIFICATION	
MOVEON.C	ORG POLITICAL A	CTION			C C00341396	
Check if X 24-h	our report 48-hour	report New report	ort Amends r	eport filed	n M = M / D = D /	Y
Full Name of Interface	<sub>Payee</sub> Media Group, Inc.				Date of Public Distribution/Di	Y   Y   Y   Y
Mailing Addres	SS Attn: Accts. Receivable				10 22 Amount	2016
	PO Box 57138					
City Washington		State DC	Zip Code 20036		Transaction ID : SE.11372	1633.84
Purpose of Ex Ad Production			Category/ Type		Date of Disbursement or Ob	2016
Name of Fede	eral Candidate		<b>x</b> Suppor	t Office	Sought: House Di	strict: 00
CLINTON, HI	LLARY RODHAM, , ,		Oppose			State: DC
	Year-To-Date ion for Office Sought		280371.01	Disbur 2016	ement For: Primary  Other (specify) ▶	<b>X</b> General
Full Name of					Date of Public Distribution/D	ssemination
PDQ Prin	ting				M M / D D / 10 22	Y Y Y Y Y Y 2016
Mailing Addre	SS 3820 S Valley View E	ilvd			Amount	2016
City Las Vegas		State NV	Zip Code 89103		ransaction ID : SE.11375 Date of Disbursement or Ob	8438.82
Purpose of Ex Printing/Brock			Category/ Type		10 / 22 /	2016
Name of Fede	eral Candidate		<b>x</b> Suppor	t Office	Sought: House D	istrict: 00
CLINTON, HI	LLARY RODHAM, , ,		Oppose			State: DC
	Year-To-Date tion for Office Sought		288809.83	Disbui 2016	sement For:  Primary  Other (specify) ▶	<b>✗</b> General
(a) SUBTOTAL	of Itemized Independent	Expenditures		······ <b>&gt;</b>		10072.66
(b) SUBTOTAL	of Unitemized Independe	nt Expenditures		······ <b>•</b>		
					7	
(c) TOTAL Ind	ependent Expenditures			······ <b>&gt;</b>		
with, or at the		any candidate or authorized			e in cooperation, consultation or (if the reporting entity is	
M	atzzie, Tom, , ,	[Electron	ically Filed]	Date 10	22 2016	Y
Signature						

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 4 OF 4 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
MOVEON.ORG POLITICAL ACTION	C C00341396			
Check if X 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y			
	e of Public Distribution/Dissemination			
Pond5 Inc.	10 22 2016			
	ount			
7th Floor				
City State Zip Code  New York NY 10010 Tra	165.00 nsaction ID : SE.11370			
Date	e of Disbursement or Obligation			
Purpose of Expenditure Ad Production  Category/ Type	10 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate  X Support Office Sou	ight: House District: 00			
CLINTON, HILLARY RODHAM	sident Senate State: DC			
Calendar Year-To-Date Per Election for Office Sought  Disbursem 274188.17	nent For: Primary <b>X</b> General Other (specify) ▶			
	te of Public Distribution/Dissemination			
Premium Beat	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 4398 St-Laurent Am	ount			
City State Zip Code	49.00			
Montreal ZZ Tran	nsaction ID : SE.11371 te of Disbursement or Obligation			
Purpose of Expenditure Ad Production  Category/ Type	10 D D D 21 2016			
Name of Federal Candidate   Support  Office Sou	ught: House District:00			
CLINTON HILLARY RODHAM	sident Senate State: DC			
Calendar Year-To-Date Per Election for Office Sought  Disbursem 2016	nent For: Primary General  Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	214.00			
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7			
(c) TOTAL Independent Expenditures	14935.66			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Matzzie, Tom, , , [Electronically Filed] Date 10	22 2016			
Oignatule				